	PATE	ORD Application or Docket Number  09/770525													
ŀ	Effective December 8, 2004  CLAIMS AS FILED - PART I								6	7		770.		フ <del></del>	
	TOTAL CLAI			ımn 1)	•	(Column 2)		SMALL		TY ]	OF		ER THA		
								RAT	E	FEE	7	RATE	FE	Ε	
FOR			NUMB	NUMBER FILED		NUMBER EXTRA		BASIC FEE 150.0		50.00	OF	BASIC F	EE 300	.00	
-	TOTAL CHAR	TAL CHARGEABLE CLAIMS		minus 20=		•		X\$ 25	is			X\$50:			
#	INDEPENDENT			minus 3 =				X100			1	Your	1		
MULTIPLE DEPENDENT CLAIM PR			PRESENT					+		OR	7200-	+-			
ŀ	* If the difference in column 1 is tess than zero, enter *0* in column 2							+180=			OR	+360=	1		
ŀ	10/- 1		TOTA			OR		. [							
ŕ	12/23/	CLAIMS AS COlumn 1	)	(Colum	n 2)	2) (Column 3)		SMAL	L ENTITY		OR		A THAP	THAN ENTITY	
AMENOMENTA	RCE	REMAINING AFTER AMENDMENT	1	HIGHE NUMB PREVIOI PAID F	ER JSLY	PRESENT EXTRA		RATE	TIC	ADDI- TIONAL FEE	8	RATE	ADO TION FEI	IAL	
	Total	. 17	Minus	~ /	9	=		X\$ 25=			OR	X\$50=		٦	
ā	FIRST PAES	~	Minus	EPENDENCE	<u> </u>	-	Г	X100=	T		OR	X200=		コ	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM											+360=	1	ᅦ	
(	Malat						L	+180= TOTAL	130	5 e	OR	TOTAL		4	
	SILLIDE	(Column 1)	•	(Column	2)	(Column 3)	AD	DIT. FEE		2,4	9C 4	VDDIT. FEE	<b>L</b>	ᅱ	
AMENDMENT B		REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOU PAID FO	T A SLY	PRESENT EXTRA		RATE	ADI TION FE	IAL		RATE	ADDI TIONA FEE	<b>AL</b>	
显	Total Independent	1. 14	Minus Minus	- 8	7	-	L	\$ 25=			DR	X\$50=		7	
₹	FIRST PRESI	ENTATION OF M		PENDENT C	AIM	-	L	(100≖			DR	X200=		7	
							1+	180=			R	+360=		1	
											)R A	TOTAL		1	
		(Column 1)	<del>,</del>	(Column		Column 3)			•					7	
ביאו		REMAINING AFTER AMENDMENT	<b></b>	HIGHEST NUMBER PREVIOUS PAID FOR	LY	PRESENT EXTRA	R	ATE	ADD TION/	IL.	Γ	RATE	ADDI-		
CINDINGIN	Total	•	Minus	**		,	L.	<u></u>	FEE	7:	1		FEE	1	
	Independent	•	Minus	***	1.		<b>—</b>	25=		<b>-</b>  °	R L	X\$50=	: 	4	
7	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						LX1	00≈			۲ ۲	(200=		1	
If the entry in column 1 is less than the entry in column 2 mails and in anti-												360=			
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR  ADDIT. FEE  OR  ADDIT. FEE														1	
ī	he "Highest Num	ber Previously Paid	For (Total or	independent) is	onen 3 She hij	), enter 3." Ohest number for	und in	the appr	opriate	box in	columi	n 1.		1	